



Contact with Birth Parents: Hearing the Voice of the Looked After Child

McDowell, E., McLaughlin, M., & CASSIDY, T. (2019). Contact with Birth Parents: Hearing the Voice of the Looked After Child: Contact with Birth Parents. *Journal of Social Sciences and Humanities*, 5(3), 194-199. [3].

[Link to publication record in Ulster University Research Portal](#)

Published in:

Journal of Social Sciences and Humanities

Publication Status:

Published (in print/issue): 31/05/2019

Document Version

Publisher's PDF, also known as Version of record

General rights

Copyright for the publications made accessible via Ulster University's Research Portal is retained by the author(s) and / or other copyright owners and it is a condition of accessing these publications that users recognise and abide by the legal requirements associated with these rights.

Take down policy

The Research Portal is Ulster University's institutional repository that provides access to Ulster's research outputs. Every effort has been made to ensure that content in the Research Portal does not infringe any person's rights, or applicable UK laws. If you discover content in the Research Portal that you believe breaches copyright or violates any law, please contact pure-support@ulster.ac.uk.

Contact with Birth Parents: Hearing the Voice of the Looked After Child

Eimear McDowell, Marian McLaughlin, Tony Cassidy*

School of Psychology, Ulster University, Coleraine, Northern Ireland

Abstract

Contact with birth parents has consistently been identified as one of the most important issues for young people in care. However, there has been considerable debate with regards to the impact of maintaining direct contact with birth parents for looked after children and young people and a lack of robust research from the perspectives of young people themselves. As such, the aim of this study was to explore the ways in which young people are affected by contact and what factors impact this experience. Semi-structured interviews were conducted with seven care-experienced young people. The most appropriate method of analysis consistent with the aims of the study was 'interpretative phenomenological analysis' (IPA) as this method is concerned with portraying and exploring the meanings and processes of individual perspectives. Three key themes emerged reflecting the children and young people's experience of contact, their sense of disempowerment and their experience of attachment relationships. Overall findings show that contact with birth parents is an extremely emotional and distressing experience for looked after children regardless of the child's desire for contact. The potential for damage is obvious and a key to reducing negative effects lies in empowering the child in the process and understanding something about their long term experience of attachment.

Keywords

Contact with Birth Parents, Looked After Children, Disempowerment, Attachment

Received: March 28, 2019 / Accepted: May 13, 2019 / Published online: May 31, 2019

@ 2019 The Authors. Published by American Institute of Science. This Open Access article is under the CC BY license.

<http://creativecommons.org/licenses/by/4.0/>

1. Introduction

The term contact has been used to describe any premeditated communication between a child in out of home care and any key figure in the child's pre-care life, mainly biological family members. The maintenance and organisation of contact between looked-after children and birth parents is a complex issue, as contact processes must be considered in relation to the child's overall care plan, relevant to court order. Provisions regarding contact arrangements with an accommodated child must be agreed upon in co-operation with the responsible authority, the parents and the child. Factors which play an influential role in determining the nature of contact arrangements involves the child's age,

developmental stage and the reason as to why they have been taken into care. The majority of studies report that approximately 40-50% of children in care maintain weekly contact with a family member, and one in six have no contact at all.

The policy of maintaining contact with birth parents for looked after children is based largely on expert opinion rather than empirical research [1-2], and those who support or advocate for looked after children have concerns that this can bias decisions and lead to some cases where the child may be put at risk. Research in the area has come under major scrutiny. In one review conducted it was suggested that the research evidence based on the consequences of contact, which influenced legislation includes a number of

* Corresponding author
E-mail address: t.cassidy@ulster.ac.uk (T. Cassidy)

methodological weaknesses, which means no clear agreement can be established on the issue of contact [1]. These authors referred to current practice as a 'social experiment', due to a deficit in evidence-based policy.

The argument that continued contact with birth parents is beneficial draws on the fact that a secure attachment with at least one caregiver is crucial for children's social and emotional development, and their capacity to form future attachment bonds [3-5]. Looked after children are at risk of both privation and deprivation of attachment [6-9]. The concept of attachment was initially considered in relation to infancy and early childhood, however more recent evidence shows that attachment evolves, develops and adapts throughout the life course [4]. Infants can develop different patterns of attachment, associated with caregivers' responses to the infant's needs [3-4]. Caregivers who exhibit a high degree of availability, nurture and comfort are often associated with infants with a secure attachment who reflect confidence in exploring their surroundings, promoting social-emotional development [3]. Equally, caregivers who fail to express comfort, closeness and discourage proximity or who display inconsistency in their responsiveness can result in infants with insecure attachments.

The complexity of the issue gives impetus to the need for empirical evidence to underpin decisions.

Recent research dispels the myth of single attachments and shows that children can form new attachments with key people [10-11]. Most research evidence in the area has been based on foster carer and child health care professional's reports, excluding the views of looked-after children [12-16].

The purpose of the current study was to address this issue by gaining an understanding of young people's perceptions of contact with birth parents.

2. Method

2.1. Design, Participants and Sampling

In order to investigate individual understandings and experiences, a qualitative methodological approach was employed using semi-structured interviews. Participant recruitment was facilitated by the Voices of Young People in Care (VOYPIC) an independent support and advocacy organisation. The total number of participants was based on data saturation [17]. The sample consisted of four young people still in care and three in after-care; one male and six females, aged 15-23. All participants had experienced continued direct contact with birth parents whilst in care. Demographic details of each participant in relation to their care experience is shown in Table 1.

Table 1. Overview of participants (real names replaced by pseudonyms).

Pseudonym	Age	Sex	Type of care	Years in care	Placement
Peter	23	Male	After-care	8	Kinship foster care
Michelle	21	Female	After-care	17	Foster care turned kinship foster care
Emma	18	Female	In care	4	Kinship foster care
Donna	17	Female	In care	7 ½	Foster care
Tina	17	Female	In care	16	Foster care turned kinship foster care
Stephanie	16	Female	After-care	6	Foster care before being returned home
Lucy	15	Female	In care	1 ½	Foster care

2.2. Data Analysis

Interpretative Phenomenological Analysis (IPA) was used as it is concerned with exploring the lived experiences of individuals [18-20]. A level of subjectivity is acknowledged in the analysis process, however this is in relation to a systematic and rigorous analysis process.

3. Results

Three key themes emerged from the analysis, contact, disempowerment and attachment relationships. Contact was an embedded theme throughout all participant accounts and reflected a pervasive emotional experience irrespective of the dynamic of the actual contact arrangement itself, such as frequency, source of contact or the location. Contact was identified as impacting the young people in significant ways,

but also impacted by a range of situations such as the purpose of contact sessions. Stephanie (aged 16 and six years in care), who had been sexually abused by her older brother, described initial poor relations with her mother but through therapeutic work in care that relationship developed to become important to her.

"We used to fight like cat and dog, but through all the work we done, we had to do work together and stuff. So like we obviously became closer. But I tell my mum everything now".

Lucy (a 15 year old girl who had been self-harming) described how she had been close to her mother but because of hiding the self-harm they had grown apart. Again through supervised contact they had become close again.

".....when everything was going on like because I self-harmed and stuff a lot and like at that kind of point I started drifting away from her.... not that we're not close now, but

like it improves and like we get closer and closer”

These are examples of how supported contact can enable the reformation of a positive bond. However the other five reported negative and damaging experiences of contact.

Donna (a 17 year old who had been in care for seven and a half years) found the experience extremely distressing.

“And then when I went home I used to cry my eyes out and I’m like ‘OK, not do that again’. And then Sonya my social worker comes out and says ‘do you want contact to happen?’ Nope. She would be like ‘but she really wants to see you’. No.”

Tina (a 17 year old who had been in care for 16 years) described a very volatile relationship with her mother.

“... she like threatened me one day and I was quite young, and I was like ‘I’m never going to see my mum again, I don’t want to go up to that house to see her’.”

Michelle (a 21 year old who had been in care for 17 years) described a situation where her parents were unpredictable in terms of attending contact sessions and where she experienced rejection during sessions

“...my daddy’s a pretty scary guy like so, although I was happy my mum was there, I wasn’t really comfortable because it was my dad was there too”

Finally Peter (a 23 year old who had been in care for eight years) described alcoholic parents, who would turn up drunk for meetings which eventually just ended.

“mum and dad always blew it because they brought in drink or they tried to drink before they came to the centre and they done their best to act sober and the social workers were just like ‘they’re drunk, send them home’. And then not long after that, once mum and dad separated, contact blew away”

All participants identified experiences of disempowerment because of not having their views taken into consideration during decision making regarding contact.

In regard to having a say Peter; *“Nope. As far as I know, no. Not even my two older brothers and they were older than me.”*

Michelle, despite feeling threatened by her dad, described just being told she had contact.

“It was just ‘you’ve contact with your dad next week’... It wasn’t like ‘do you wanna see your dad’ or I mean it was just ‘you’ve contact’. And then just the way it was put I felt like I couldn’t really refuse ...”

Most of the young people’s view of social services represented an authoritarian style which led to young people feeling they did not have a choice with regards to different

aspects of contact such as their attendance or who they wanted to be the source of contact. Emma felt she had little control over how contact sessions were organised as she described the impact of her birth mum’s aggressive behaviour during sessions and how this affected future arrangements.

“...our contact changed so many times. Like we, we moved from supervised contact in the actual social service’s building to my aunty supervising it..... my mum thought she could get away with anything just because it was her sister..... I thought I could maybe have contact with my mum without a social worker, without anybody there, no (laughs). It was bad, but like I sort of thought I could cope with it and it would be alright, I could handle her. And like I was doing my A-levels at the time and I just couldn’t.”

Decision-making regarding contact is a complex issue and to help maintain a sense of stability and empowerment, including children and young people in decision making aspects of contact and giving them the opportunity to express their feelings on a regular basis contributes to their overall experience of contact.

Looked after children and young people have more emotional and behavioural needs than the general population frequently due to experiences which originate before coming into care [21]. However research has consistently highlighted that a placement which offers children and young people a sense of stability [22], a secure base in which they feel safe [23], and the development of meaningful relationships with foster carers [24-26], can help children and young people cope and potentially overcome past experiences of maltreatment [12, 26].

While it is difficult to establish what sort of attachment these children and young people had with their birth family it does seem clear that it was not a secure attachment. Lucy (who was one of two children who had something positive to say about contact) described what seems like an anxious attachment with her mother.

“Like we used to have like, we weren’t even like mother and daughter we were more like best friends. But em like we would have had so much fun and stuff but then like I just get really low and like if she asked me what was wrong or anything like that, I would just kind of like just shut myself in so. I couldn’t really talk to her”

All of the children and young people reported negative relations with their birth family ranging from feeling threatened to feeling rejected and having their sense of self devalued. However, all of young people had a strong identification with at least one foster carer during their time in care, some comparing them to a mother/father figure which had been absent in their lives. Lucy reported feeling a

sense of attachment to her foster family.

"I just feel like another part of the family. Like I just don't feel like just like, I'm not like just another person if you know what I mean. Like I actually do feel like part of it."

Lucy's membership with her foster family was imbedded in the inclusion she felt in everyday life and activities, which ultimately enhanced a sense of belonging.

Conclusions and results are necessary for a qualified article. In this part, authors arrive at the conclusion and present results, which help summarize the points authors have made. What's more, this part allows authors to have a final say on the issues they raised in the article, to synthesize the thoughts, to demonstrate the significance of ideas and to propel readers to a new view of the subject.

4. Discussion

Findings revealed the overall significance of issues relating to contact and the impact this had on young people's emotional and behavioural well-being, with all participants expressing highly emotive reactions to contact with birth parents. The experience of contact was in turn influenced by how the process was organised, particularly the young people's sense of disempowerment in regard to decisions, and by the quality of the pre-existing attachment relationship. There were negative aspects to contact for all the young people, even those two who were favourably disposed towards it. The negative experiences were located in a sense of disempowerment in having no choice and basically never being asked if they wanted contact. This was exacerbated by the unreliability of parents, the negative behaviour of parents in contact sessions, and further disempowerment engendered by fear and lack of control in meetings. Despite the negativity experienced there was an underlying desire from all the young people that things could be otherwise, that contact could be better managed and more positive, and in some cases a concern for their parents' health and wellbeing.

The complexity of young people's experiences make it impossible to conclude if contact was overall positive or negative. However, for all the young people, being removed from birth parents and entering the care system seemed to be associated with losing elements of control over certain aspects of their lives. Most young people in the current study described contact sessions as fundamentally determined by parental attitudes. Most young people had a strong desire for contact at certain stages in their lives and attendance was important as it provided an opportunity to develop, or strengthen relationships with parents. When contact did not meet the emotional needs of young people, it resulted in emotional distress, for example crying after sessions or

feeling devalued, frustrated or confused [12]. The significant impact of contact was also evidenced when young people in the current study were satisfied with the quality of sessions. In these cases, the attitude of both the young person and birth parent was critically important, as this impacted the purpose that contact served, mainly to develop a strong relationship and the potential to achieve reunion. Consistent reassessment, with the input of all parties, will reduce the possibility of maintaining harmful relationships. Ultimately in cases where reunion is not achievable, the purpose of contact must be determined. It is also important that an assessment be made to establish the safest option in meeting the needs of the young people, and to acknowledge that face-to-face contact may not be beneficial and in fact may serve to cause harm. In cases where a parent, young person, or both did not have a strong desire to achieve reunion, contact served only to enhance the negative dynamic of the relationship. Young people in the current study had a history of maltreatment with their birth parents, however at certain stages in their lives they had a desire to establish a relationship with their parents through contact. In all cases contact resulted in exposure to further abuse or rejection. In these cases, without the parent's desire or ability to work towards specific goals to improve the relationship, contact served only to impact the young people's emotional and behavioural health.

Young people in the current study who experienced problematic contact wished ultimately to remain in their current placement. Young people coming into care may have experienced maltreatment in the form of neglect, abuse or rejection, therefore are unlikely to have formed secure attachments [27], which can also impact the child's ability to form new attachment bonds if further rejection is experienced [28]. Interestingly some young people identified their birth parents as important figures in their lives yet did not identify them as a source of support.

Most young people also stated how if given the choice they would choose to remain in the care of their foster family as oppose to birth family, suggesting that the young people have formed new attachments with other carers. This highlights the importance of considering attachment as a longer term issue rather than just focusing on attachment with birth parents. All young people identified a positive and strong relationship with at least one foster carer during their time in care. In the current study the factors associated with young people's ability to form attachment bonds with foster caregivers was fundamentally based on the love and care they received during that placement and being included as part of their foster family.

5. Conclusion

Overall results in the current study highlight the significant impact of contact on young people, and how sessions can either function to strengthen the quality of relationships, or re-expose young people to potentially distressing experiences. Assessing the attachment relationship with birth parents could aid in deciding what purpose contacts might serve and how it is ultimately shaped. Even when contact was emotionally distressing all young people in the current study formed a strong positive relationship with a foster carer during their time in care. This suggests although contact impacted the emotional and behavioural health of some young people which was detrimental to their placement status during certain situations, all young people had the ability to form new attachments with secondary caregivers [29]. Secure attachment relationships with birth parents should not be the only objective; attachment should be considered on a case-by-case basis to determine what best serves interests of the young person [30].

We give the last word to one participant who in response to the question, “*what would you have said if somebody had asked ‘do you want contact?’*”, replied “*No*”.

References

- [1] Quinton, D., Rushton, A., Dance, C. & Mayes, D. (1997) Contact between children placed away from home and their birth parents: research issues and evidence. *Clinical Child Psychology and Psychiatry*, 2, 393–414.
- [2] Quinton, D., Selwyn, J., Rushton, A. & Dance, C. (1999) Contact between children placed away from home and their birth parents: Ryburn’s ‘reanalysis’ analysed. *Clinical Child Psychology and Psychiatry*, 4, 519–531.
- [3] Ainsworth, M. D. S., Blehar, M. C., Waters, E., & Wall, S. (1978). Patterns of attachment: A psychological study of the strange situation. Hillsdale, NJ: Erlbaum.
- [4] Cassidy, J., Jones, J. D., & Shaver, P. R. (2013). Contributions of Attachment Theory and Research: A Framework for Future Research, Translation, and Policy. *Developmental Psychopathology*; 25 (4 0 2): 1415–1434. doi: 10.1017/S0954579413000692.
- [5] Neil, E. C., & Howe, D. (2004). *Contact in adoption and permanent foster care: Research, theory and practice*. British Association for Adoption and Fostering (BAAF).
- [6] Carlson, E. A., Hostinar, C. E., Mliner, S. B. & Gunnar, M. R. (2014). The Emergence of Attachment following Early Social Deprivation. *Developmental Psychopathology*; 26 (2): 479–489. doi: 10.1017/S0954579414000078.
- [7] Rutter, M. (1981). Stress, Coping and Development: Some Issues and Some Questions. *Journal of Child Psychology and Psychiatry*; 22 (4), 323–356, DOI: 0012-9630/81/040323-34 t02.OO/O.
- [8] Rutter, M., Beckett, C., Castle, J., Colvert, M., Kreppner, J., Mehta, M., Stevens, S. & Sonuga-Barke, E. (2007) Effects of profound early institutional deprivation: An overview of findings from a UK longitudinal study of Romanian adoptees, *European Journal of Developmental Psychology*, 4: 3, 332–350, DOI: 10.1080/17405620701401846.
- [9] Rutter M. the ERA Study Team. (1998). Developmental catch-up, and deficit, following adoption after severe global early privation. *Journal of Child Psychology and Psychiatry*; 39 (4): 465–476.10.1111/1469-7610.00343 [PubMed: 9599775].
- [10] Kelly, J. B & Lamb, M. E. (2003) Developmental issues in relocation cases involving young children: when, whether, and how? *Journal of Family Psychology*, 17 (2), 193–205.
- [11] Stovall-McClough, K. C & Dozier, M. (2004). Forming attachments in foster care: Infant attachment behaviors during the first 2 months of placement. *Development and psychopathology*, 16 (02), 253–271.
- [12] Dickson K, Sutcliffe K, & Gough D., & Statham, J. (2009). Improving the emotional and behavioural health of looked-after children and young people (LACY), London: Centre for Excellence and Outcomes in Children and Young People’s Services.
- [13] Munro, E. (2001). Empowering looked-after children. *Child and Family Social Work*, 6 (2), 129–138.
- [14] Ofsted (2009) Keeping in Touch, Manchester, Ofsted. A report of children’s experience by the Children’s Rights Director for England. Accessed at: <http://dera.ioe.ac.uk/10952/>
- [15] Stevens, I., & Boyce, P. (2006). The National Care Standards: hearing the voices of young people in residential care. *Scottish Journal of Residential Child Care*, 5 (1), 1.
- [16] Tarren-Sweeney, M. (2008). Retrospective and concurrent predictors of the mental health of children in care. *Children and Youth Services Review*, 30 (1), 1–25.
- [17] Fusch, P. I., & Ness, L. R. (2015). Are we there yet? Data saturation in qualitative research. *The Qualitative Report*, 20 (9), 1408.
- [18] Harper, D., & Thompson, A. R. (Eds.). (2011). *Qualitative research methods in mental health and psychotherapy: A guide for students and practitioners*. John Wiley & Sons.
- [19] Jarman, M., Smith, J. A., & Walsh, S. (1997). the psychological battle for control: a qualitative study of health - care professionals’ understandings of the treatment of anorexia nervosa. *Journal of Community & Applied Social Psychology*, 7 (2), 137–152.
- [20] Smith, J. A. (Ed.). (2015). *Qualitative psychology: A practical guide to research methods*. Sage.
- [21] Padbury, P. and Frost, N. (2002) *Solving problems in foster care: Key issues for young people, foster carers and social services*, London: Children’s Society.
- [22] Moyers, S., Farmer, E., & Lipscombe, J. (2006). Contact with family members and its impact on adolescents and their foster placements. *British Journal of Social Work*, 36 (4), 541–559.
- [23] Cheung, C., Goodman, D., Leckie, G., & Jenkins, J. M. (2011). Understanding contextual effects on externalizing behaviors in children in out-of-home care: Influence of workers and foster families. *Children and Youth Services Review*, 33 (10), 2050–2060.

- [24] Oosterman, M., Schuengel, C., Slot, N. W., Bullens, R. A., & Doreleijers, T. A. (2007). Disruptions in foster care: A review and meta-analysis. *Children and youth services review*, 29 (1), 53-76.
- [25] Sinclair, I., Wilson, K. & Gibbs, I. (2005) *Foster Placements. Why They Succeed and Why They Fail*, London, Jessica Kingsley Publishers.
- [26] Withington, T., Duplock, R., Burton, J., Eivers, A., & Lonne, B. (2017). Exploring children's perspectives of engagement with their carers using factor analysis. *Child Abuse & Neglect*, 63, 41-50.
- [27] Radke-Yarrow, M., Cummings, E. M., Kuczynski, L., & Chapman, M. (1985). Patterns of attachment in two- and three-year-olds in normal families and families with parental depression. *Child Development*, 56, 884-893.
- [28] Weinfield, N., Sroufe, L. A., & Egeland, B. (2000). Attachment from infancy to early adulthood in a high-risk sample: Continuity, discontinuity and their correlates. *Child Development*, 71, 695-702.
- [29] Deborde, A. S., Touati, C. D., Herrero, L., & Touati, A. (2016). Relationship between attachment and self-esteem in adolescents placed in foster or in institutional care: Respective contribution of the biological mother and secondary caregiver. *Année Psychologique*, 116 (3), 391-41.
- [30] Boyle, C. (2017). 'What is the impact of birth family contact on children in adoption and long - term foster care?' A systematic review. *Child & Family Social Work*, 22 (S1), 22-33.